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APPLICANTS

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** CONTINUING DATA ***** *NONE*

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** FOREIGN APPLICATIONS ***** *NONE*

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IF REQUIRED, FOREIGN FILING LICENSE GRANTED
 ** 08/23/2001

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY NJ	SHEETS DRAWING 3	TOTAL CLAIMS 36	INDEPENDENT CLAIMS 4
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Verified and Acknowledged *ll* Examiner's Signature Initials

ADDRESS

Docket Administrator
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 07733-3030

TITLE

Space time spreading and phase sweep transmit diversity

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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